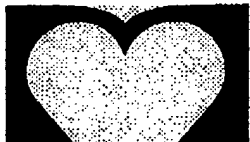


AUG 24 2005



Mortara INSTRUMENT

7865 North 86th Street, Milwaukee, WI 53224 Telephone 414.354.1600 Fax: 414.354.4760
Milwaukee, Wisconsin -- Bologna, Italy -- Essen, Germany -- Utrecht, Netherlands

Facsimile

Fax Number:

703 872 9306

Attention:

George Evancisko

From:

David Mortara

Date:

8/24/05

Subject:

Application 10/785,956

This is page 1 of 4 page(s).

M020 Rev. 1



August 24, 2005

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313
Attn: George Evanisko

Mr. Evanisko,

With reference to our application 10/795,956 and the Office Communication from you dated 7/25/2005, I wish to retain claims 14-20, and accept the withdrawal of claims 9-13.

I write on this matter directly because the filing attorney, J Kuborn, has withdrawn his power of attorney. A copy of his withdrawal letter is attached.

Sincerely,
David Mortara

A handwritten signature in black ink that reads "David Mortara". The signature is written in a cursive style with a large, stylized "D" and "M".

Mortara INSTRUMENT, INC.

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Please type a plus sign (+) inside this box (+)

Patent and Trademark Office: U.S. Department of Commerce

0001/PTO Rev. 10/95	U.S. Department of Commerce Patent and Trademark Office	Application Number 10/795,956
		Filing Date March 8, 2004
		First Named Inventor David W. Mortara
		Group Art Unit 3782
		Examiner Name Evanisko, George
Total Number of pages in this Submission 2		Attorney Docket Number 2395-00033

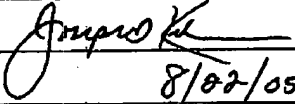
TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

ENCLOSURES (check all that apply)


<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Response <input type="checkbox"/> After final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement/PTO-1449 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ <input type="checkbox"/> Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37.152 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication To Technology Group <input type="checkbox"/> Appeal Communication to Board Of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below) <input checked="" type="checkbox"/> RETURN RECEIPT POSTCARD <input type="checkbox"/> _____
Remarks 		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Or Individual Name	Joseph D. Kuborn (Reg. No. 40,689) ANDRUS, SCEALES, STARKE & SAWALL, LLP 100 East Wisconsin Avenue, Suite 1100, Milwaukee, WI 53202
Signature	
Date	8/22/05

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the 22nd day of August, 2005.

Typed or printed name	Jo Ellen Bullock		
Signature		Date	8-22-05